Approved for use through 7/31/2006, OMB 0651-002 Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a yalid OMB control number. U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE PATENT APPLICATION FEE DETERMINATION RECORD Application or Dock Substitute for Form PTO-875 CLAIMS AS FILED - PART I OTHER THAN (Column 1) (Column 2) SMALL ENTITY OR SMALL ENTITY FOR NUMBER FILED NUMBER EXTRA BASIC FEE (37 CFR 1.16(a)) RATE FEE RATE 395.00 :790.02 TOTAL CLAIMS OR (37 CFR 1.16(c)) x **: 2**5 = minus 20 = x ±50 INDEPENDENT CLAIMS OR (37 CFR 1.16(b)) minus 3 = x \$/00 = x 200 = OR MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d)) 180. ÒR If the difference in column 1 is less than zero, enter "0" in column 2. TOTAL TOTAL OR CLAIMS AS AMENDED - PART II (Column 1) OTHER THAN (Column 2) (Column 3) OR SMALL ENTITY SMALL ENTITY CLAIMS HIGHEST REMAINING NUMBER PRÉSENT RATE ADDI-ENDMENT PREVIOUSLY AFTER EXTRA RATE ADDI-TIONAL AMENDMENT TIONAL PA® FOR FEE · Fotal (SF CFR 1.16(c)) FEE Minus × 25 ×:.50 Independent (37 CFR 1.16(b)) OR x s / CO ×:200 OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR TOTAL TOTAL ADD'L FEE ADD'L FEE OR (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST മ REMAINING PRESENT NUMBER RATE ADDI-AFTER MENDMENT RATE PREVIOUSLY ADDI **EXTRA** TIONAL PAID FOR TIONAL FEE · Total (37 CRR 1.16(cl) ENDME Minus FEE × s50 OR Minus 100 × 200 OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) +:180 +=360 OR TOTAL TOTAL ADO'L FEE OR ADD'L FEE (Column 1) (Column 2) (Column 3) CLAMS HIGHEST REMAINING NUMBER PRESENT RATE ADDI-ENT RATE AFTER ADDI-PREVIOUSLY **EXTRA** TIONAL AMENDMENT TIONAL PAID FOR Total (37 CFR 1.16(c)) FEE ENDM Minus <u> ×125</u> OR. Independent (37 CFR 1.16(b)) Minus IOD <u>× 201)</u> OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR ADD'L FEE ** If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". OR ADD'L FEE

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